# MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET
## (FOR USE WITH FORM PTO-875)

SERIAL NO. 10/559645

APPLICANT(S)

## CLAIMS

| Claim | AS FILED IND. | AS FILED DEP. | AFTER 1st AMENDMENT IND. | AFTER 1st AMENDMENT DEP. | AFTER 2nd AMENDMENT IND. | AFTER 2nd AMENDMENT DEP. |
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| TOTAL IND. | 2 | | 2 | | | |
| TOTAL DEP | 13 | | 13 | | | |
| TOTAL CLAIMS | 15 | | 15 | | | |

| Claim | AS FILED IND. | AS FILED DEP. | AFTER 1st AMENDMENT IND. | AFTER 1st AMENDMENT DEP. | AFTER 2nd AMENDMENT IND. | AFTER 2nd AMENDMENT DEP. |
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| TOTAL IND. | | | | | | |
| TOTAL DEP | | | | | | |
| TOTAL CLAIMS | | | | | | |

PTO - 1360 (REV. 11/01)

U.S. DEPARTMENT of COMMERCE